



Commonwealth
of Massachusetts

Center for Health
Information and Analysis

All Payer Claims Database Data Volume Reports

2008 - 2012

March 2013

The Commonwealth of Massachusetts established an All Payer Claims Database (APCD) in 2010 as one of the largest data collection efforts undertaken by the state. Regulation 114.5 CMR 21.00, Health Care Payer Claims Data Submissions, requires health insurance payers to submit medical, pharmacy, and dental claims, as well as information about member eligibility, benefit design, and providers to the Center for Health Information and Analysis (CHIA) for Massachusetts residents. The goals of the APCD are to provide administrative simplification to payers and to provide access to timely, accurate, and relevant data for improving quality, mitigating costs, and promoting transparency in the health care delivery system.

The charts below depict the number of records submitted to the Center as of December 2012 by health insurance payers. These Data Volume Reports are a concise way of presenting the amount of APCD data collected by year and file type.

Please feel free to submit any questions related to the reports to the Center's APCD mailbox: CHIA-APCD@state.ma.us.

Thank you for your interest in the All Payer Claims Database.

Commonwealth of Massachusetts-Center for Health Information and Analysis (CHIA)
APCD Data Volume Reports 2008-2012 (based on data received by 12/19/2012)

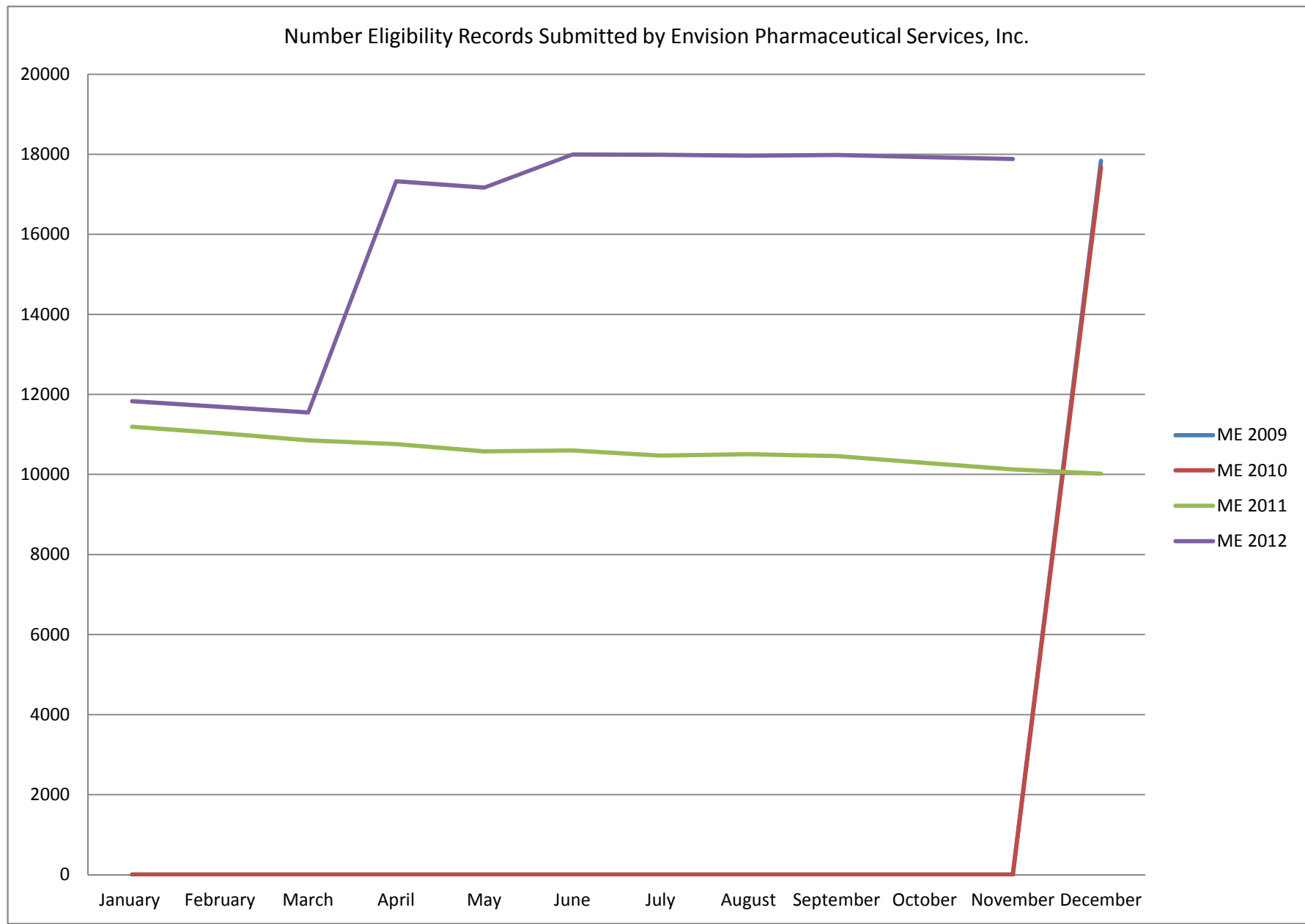
Envision Pharmaceutical Services, Inc.														
File Type	Submission Year	January	February	March	April	May	June	July	August	September	October	November	December	Total
PR	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
PR	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
PR	2012	0	0	0	0	0	0	0	0	0	0	0	0	0
ME	2009	0	0	0	0	0	0	0	0	0	0	0	17,834	17834
ME	2010	0	0	0	0	0	0	0	0	0	0	0	17,674	17674
ME	2011	11,193	11,032	10,850	10,757	10,574	10,602	10,470	10,507	10,462	10,290	10,127	10,018	126,882
ME	2012	11,832	11,692	11,549	17,326	17,166	17,994	17,991	17,963	17,984	17,930	17,882		177,309
PV	2011	111,996	111,987	112,034	112,005	112,016	111,994	111,997	111,993	111,982	111,998	112,013	112,022	1,344,037
PV	2012	111,945	100,468	101,051	101,839	102,338	102,968	103,764	104,790	105,590	106,342	107,047		1,148,142
MC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2012	0	0	0	0	0	0	0	0	0	0	0		0
PC	2008	6,586	6,368	6,439	6,108	6,399	6,245	7,390	6,146	6,588	6,757	6,347	6,922	78,295
PC	2009	26,272	25,301	28,954	28,965	29,679	31,720	31,954	32,308	32,468	33,515	32,134	33,908	367,178
PC	2010	14,415	12,605	14,478	13,600	12,884	13,508	13,047	13,321	13,139	12,776	13,219	13,050	160,042
PC	2011	12,671	12,118	12,854	11,797	12,445	12,833	11,532	12,042	12,100	11,698	11,599	11,779	145,468
PC	2012	14,110	13,162	13,591	13,266	14,419	13,363	12,809	13,311	12,750	13,526	12,703		147,010
DC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2012	0	0	0	0	0	0	0	0	0	0	0		0

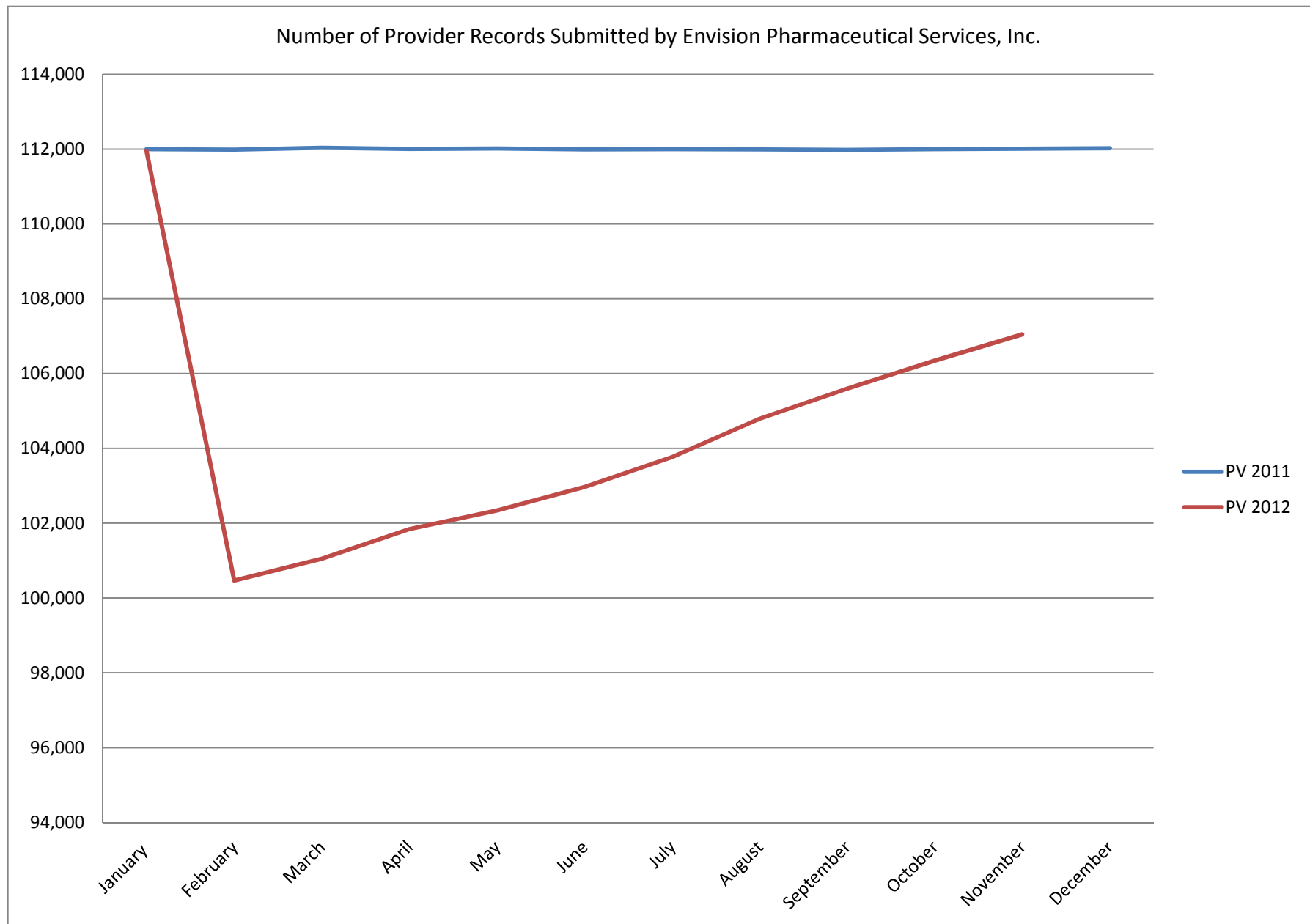
***Key:** PR=Product Records; ME=Member Eligibility Records; PV=Provider Records; MC=Medical Claim Lines; PC=Pharmacy Claim Lines; and DC=Dental Claim Lines.

The Volume Report presents the APCD inventory as of December 2012 and reflects the related compliance requirements:

- Medical, pharmacy, and dental submissions are required monthly beginning January 2008.
- Provider submissions are required monthly beginning January 2011. The May 2011 submission contains historical records from 2008 through May 2011.
- Product submissions are required quarterly beginning December 2010. The May 2011 submission contains historical records from 2008 through 2010 plus 2011, quarter one.
- Member eligibility submissions are required monthly beginning in January 2011. Prior to 2011, payers were required to submit two eligibility files: a December 2009 eligibility submission covering calendar years 2008 and 2009, and a December 2010 eligibility submission covering calendar years 2009 and 2010. Eligibility files contain data for twenty-four months of member eligibility.
- The APCD liaisons monitor and enforce compliance rules and authorize exceptions. Some carriers have incomplete data due to: exemptions from filing, limited claim or member base, phasing into APCD and are currently in testing or ramping up their production data filings, are in the process of updating specific submissions, and /or non-compliance.

These numbers represent the number of records submitted, not actual counts of members, providers, products or claims.





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